Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control nu

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Nu

OR

OR

OR

TOTAL

ADD'L FEE

Substitute for Form PTO-875									10805066		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY		OR 	OTHER THAI	
	FOR	NUM	NUMBER FILED		NUMBER EXTRA		RATE	FEE]	RATE	FE
	SIC FEE CFR 1.16(a))							s	OR		
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20 =		·		x \$=		OR	x \$=	\$
	DEPENDENT CLA CFR 1.16(b))	AIMS	minus	3 = .		ļ	x \$=		OR	X \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$ =		OR	+5 =	
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL	
		CLAIMS AS AN	MENDE	D – PART II	•						
		(Column 1)	٠.,	(Column 2)	olumn 2) (Column 3)		SMALL ENTITY		OR		R THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION FEI
M	Total (37 CFR 1.16(c))		Minus	••	=		x \$ =		OR	× \$ =	
EN	Independent (37 CFR 1.16(b))	•	Minus	•••	=		x \$ =		OR	x \$ =	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ 5 =		OR	+ \$ =	
	A					ŧ	TOTAL ADD'L FEE		, OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						
AMENDMENT B	1/20/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION FEE
	Total (37 CFR 1.16(c))	21	Minus	21	=		x \$=		OR	x s=	
EN	Independent (37 CFR 1.16(b))	3	Minus	··· 3			x \$=		OR	x \$=	
¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=	
						_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		÷: (Column 2)	(Column 3)	_	<u> </u>				
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADD TION/ FEE
NDMEN	Total (37 CFR 1.16(c))	•	Minus	••	=		× \$ =		OR .	x s =	_
Ξſ	Independent	•	Minus	•••	=	<u> </u>					

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

(37 CFR 1.16(b))

TOTAL

ADD'L FEE

[•] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

^{**} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.